

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		64834	1/10
O.I.P.E. CLASSIFIER			1-27-00
FORMALITY REVIEW	unmo	68231	2-3-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4-10-01
2	✓	✓	4-10-01
3	✓	✓	4-10-01
4	✓	✓	4-10-01
5	✓	✓	4-10-01
6	✓	✓	4-10-01
7	✓	✓	4-10-01
8	✓	✓	4-10-01
9	✓	✓	4-10-01
10	✓	✓	4-10-01
11	✓	✓	4-10-01
12	✓	✓	4-10-01
13	✓	✓	4-10-01
14	✓	✓	4-10-01
15	✓	✓	4-10-01
16	✓	✓	4-10-01
17	✓	✓	4-10-01
18	✓	✓	4-10-01
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20	✓	✓	4-10-01
21	✓	✓	4-10-01
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31	✓	✓	4-10-01
32	✓	✓	4-10-01
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42	✓	✓	4-10-01
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45	✓	✓	4-10-01
46	✓	✓	4-10-01
47	✓	✓	4-10-01
48	✓	✓	4-10-01
49	✓	✓	4-10-01
50	✓	✓	4-10-01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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